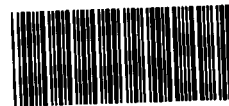


FIELD TRIP SUMMARY REPORT



SDMS DocID

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ORIGINAL
(Red)

This summary should be prepared in conjunction with the Preliminary Assessment Form, (EPA Form T2070-2), so that a proper site rating can be assigned.

Name of Site Gulf Oil Products Co., Sinking Spring Terminal

EPA Case Number _____

- I. If site is active, has owner/operator notified EPA in accordance with Section 3010 of RCRA. Yes ☒ No ☐ *site is no longer active (closed March '83)*

If Yes: a) Note EPA I.D. No. PADO10556603

- b) Is the site a generator, storer, treater or disposer of hazardous waste? (CIRCLE ONE).

when site was active they were generators only

- II. If the answers submitted in Part VI (Hazard Description) of EPA Form T2070-2 or observations warrant a more thorough site investigation/sampling, please attach a sketch map showing those areas of concern. (i.e.: lagoons, leachate seeps, drum storage, monitoring wells, etc.).

- III. Please list site contacts and accompanying inspectors; include name, title and phone numbers.

Site Contact: Kenneth Talbot, Terminal Supervisor, Gulf Oil Products Co.
(215)-264-0518

Inspectors:

P.A.D.E.R. 1. Bureau of Water Quality Mgmt, Craig White, Water Quality Specialist } 215
2. Bureau of Solid Waste Mgmt, Mark Selman, Solid Waste Specialist } 378-4175

- IV. Site observations: (attach a topo map).

- A. Population within 1000 ft. of the site is (CHECK ONE)

1. 0-10 people ☒
2. 10-100 people
3. greater than 100 people

- B. List surrounding land use: (woodlot, agricultural, playground, industrial, etc.)

North: agriculture

South: light industrial

East: residential

West: agriculture

C. Water supply for area. (CHECK ONE)

1. Surface intakes (locate on attached map)
2. Municipal wells (locate on attached map) ✓
3. Domestic wells: - none within 1/4 mile

- a. Approximate number within 1/4 mile. N/A
- b. Locate a minimum of 3 wells on attached map and list below:

Property owner _____

Address _____

Phone No. _____

Well records	YES	NO	YES	NO	YES	NO
Odor problems	YES	NO	YES	NO	YES	NO
Taste problems	YES	NO	YES	NO	YES	NO

- c. If odor or taste problems are reported please elaborate: N/A

D. Are surface or subsurface, (leachate), drainage areas from site apparent?
YES ☒ NO ☐. If yes:

1. Were unusual odors or stains noted? YES ☐ NO ☒
2. Was stressed vegetation noted? YES ☐ NO ☒

a. If yes please note area on map.

E. Are streams or receiving waters adjacent to site? YES ☒ NO ☐
If yes, list observations: (i.e.-change in benthic community, change in plant density/diversity, change in color, siltation, etc.). field trip conducted in

January 84, Receiving stream name is Cacoosing Creek. Stream is mildly stressed before it flows past site in question; it receives agricultural runoff and leachate from nearby landfill.

F. Site topography: (i.e.-plateau, strip mine ravines, etc.). located in low-lying valley - see attached topo sheet.

G. Other observations: (i.e.-erosion, located in flood plain, etc.). within 1/2 mile of public wells

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V. Were photographs taken? YES _____ NO ☒
If yes: Who has custody of photos? _____

Name: _____

Agency: _____

Phone No.: _____

VI. Is a hydrogeological survey for this site attached? YES _____ NO ☒
If no, Section III D of EPA Form T2070-2 must be completed.

VII. Please attach pertinent copies of reports or data reviewed by inspector:
(i.e.-State monitoring data, consultant reports, etc.).

VIII. Name of Inspector: Mark Selman

Agency: PA: DER

Phone No.: 215-378-4175

Time on Site: 1/19/84 2 hrs.

Weather Conditions: Cold, 6" new snow